

**2007
HSRS AODA
MODULE DESKCARD
MODULE TYPE 6**

CLIENT CHARACTERISTICS (Field 8)

- 19 Developmental disability - brain trauma
- 23 Developmental disability - cerebral palsy
- 25 Developmental disability - autism
- 26 Developmental disability - mental retardation
- 27 Developmental disability - epilepsy
- 28 Developmental disability - other or unknown
- 29 Family member of developmental disability client
- 86 Severe emotional disturbance - child / adolescent
- 02 Mental illness (excluding SPMI)
- 03 Serious and persistent mental illness (SPMI)
- 14 Family member of mental health client
- 04 Alcohol client
- 05 Drug client
- 10 Chronic alcohol or other drug client (includes SSI)
- 12 Alcohol and other drug client
- 16 Family member of alcohol and other drug client
- 17 Intoxicated driver
- 39 Gambling client
- 07 Blind / visually impaired
- 08 Hard of hearing
- 32 Blind / deaf
- 79 Deaf
- 09 Physical disability / mobility impaired
- 36 Other handicap
- 59 Unmarried parent
- 71 Victim of domestic abuse
- 50 Regular caregiver of dependent person
- 55 Frail elderly
- 57 Abused / neglected elder
- 18 Alzheimer's disease / related dementia
- 43 Migrant
- 44 Refugee
- 45 Cuban / Haitian entrant
- 33 Corrections / criminal justice client (adult only)
- 80 Homeless
- 91 Hurricane Katrina evacuee
- 92 Hurricane Rita evacuee
- 99 None of the above (codependent client only)

SPECIAL CHILDREN'S SERVICES CATEGORIES

- 61 CHIPS - abuse and neglect
- 62 CHIPS - abuse
- 63 CHIPS - neglect
- 64 Family member of abused / neglected child
- 69 JIPS - status offender
- 70 Family member of status offender
- 68 CHIPS - other
- 74 Family member of CHIPS - other
- 66 Delinquent
- 73 Family member of delinquent

REFERRAL SOURCE (Field 12)

- 01 Self
- 02 Family, friend, or guardian
- 03 AODA program (includes AA, Al-Anon)
- 04 Hospital, clinic, physician, health agency
- 05 School, college
- 06 IDP-court
- 07 IDP-Division of Motor Vehicle (DMV)
- 08 Probation and parole
- 09 Other court, criminal or juvenile justice or law enforcement
- 10 Employer, Employee Assistance Program (EAP)
- 11 County social services
- 13 IV drug outreach worker
- 14 Other social services agencies or community referral
- 15 Drug court
- 16 OWI court—monitors the multiple OWI offender

SOS DESK (608) 266-9198
9:00 - 11:30 A.M. and 12:30 - 2:30 P.M.
or leave a voice mail message.
E-mail Address: soshelp@dhfs.state.wi.us
FAX (608) 267-2437

HSRS Handbook and Terminal Operator's Guide:
<http://www.dhfs.wisconsin.gov/HSRS/index.htm>

WI Department of Health and Family Services
Division of Disability and Elder Services
DDE-458I (Rev. 4/2007)

EDUCATION AT TIME OF ADMISSION (Field 13)

Enter the two digit number of years.

- 01-11 Highest grade completed
- 12 High school diploma or GED
- 14 Some college or vocational / technical school; assoc. degree or voc. tech. degree
- 16 Bachelors degree
- 18 Advanced degree (Master's, Ph.D.)

FAMILY RELATIONSHIP (Field 14)

Marital / family / interpersonal relationships / social support system

- 1 Very frequent, positive contact
- 2 Frequent or more often, usually positive, contact
- 3 Occasional or more often, sometimes positive, sometimes negative contact
- 4 Contact is usually negative
- 5 Little or no contact

LIVING ARRANGEMENT AT ADMISSION (Field 16)

- 01 Street, shelter, no fixed address, homeless
- 02 Adults, private residence or household; living alone or with others without supervision; includes persons age 18 and older living with parents
- 03 Supported or semi-supervised residence
- 04 Specialized facility with on-site supervision
- 05 Other institution
- 06 Jail or correctional facility
- 07 Children under age 18 living with parents

BRIEF SERVICES (Field 17)

If an episode will only involve any of the following services, brief service may be coded Yes.

- 301 Court intake studies
- 501 Crisis intervention
- 507 / 50 Outpatient, emergency regular
- 507 / 65 Medication management
- 601 Outreach
- 602 Information and referral
- 603 Intake assessment

EMPLOYMENT STATUS (Field 18)

- 1 Employed full-time - 35 or more hours a week. Includes those working both full and part-time jobs
- 2 Employed part-time - less than 35 hours a week
- 3 Unemployed - looking for work in the past 30 days; includes registering for unemployment and on layoff from job
- 4 Unemployed - not looking for work in the past 30 days
- 5 Not in the labor force – homemaker
- 6 Not in the labor force – student
- 7 Not in the labor force – retired
- 8 Not in the labor force – disabled
- 9 Not in the labor force – inmate of jail, prison, or other institution

SUBSTANCE PROBLEM (Field 25a - 25c)**SUBSTANCE PROBLEM AT DISCHARGE (Field 26)**

- 01 None
- 02 Alcohol
- 03 Cocaine / crack
- 04 Marijuana / hashish / cannabis / THC
- 05 Heroin
- 06 Nonprescription methadone
- 07 Dilaudid / hydromorphone
- 08 Other opiates and synthetics (codeine, morphine, oxycodone, demerol, opium, fentanyl, oxymorphone, etc.)
- 09 PCP (phencyclidine)
- 10 LSD
- 11 Other hallucinogens (MDA, MDMA-ecstasy, peyote, mescaline, psilocybin, psilocin, STP, ketamine)
- 12 Methamphetamine / ice; methcathinone / cat
- 13 Other amphetamines (benzedrine, speed, dexedrine, methedrine, ritalin, preludein, and any other amines and related drugs)
- 14 Other stimulants (phentermine, benzphetamine, mazindol, phendimetrazine, pemoline, chlortermine, etc.)

SUBSTANCE PROBLEM (Field 25a - 25c) (Cont'd)
SUBSTANCE PROBLEM AT DISCHARGE (Field 26)

- 15 Benzodiazepines (diazepam, flurazepam, chlordiazepoxide, clorazepate, lorazepam, alprazolam, oxazepam, temazepam, triazolam, clonazepam, halazepam, Rohypnol, etc.)
- 16 Other tranquilizers (Meprobamate, Equanil, Miltown)
- 17 Barbiturates (phenobarbital, Seconal, Nembutal, amobarbital, etc.)
- 18 Other nonbarbiturate sedatives or hypnotics (methaqualone, Quaalude, glutethimide, chloral hydrate, ethchlorvynol, Placidyl, GHB, etc.)
- 19 Inhalants (ether, glue, aerosols, solvents, gases, chloroform, nitrous oxide)
- 20 Over-the-counter diet, alert, sleep aids, cough syrup
- 21 Other

USUAL ROUTE OF ADMINISTRATION**(Field 27a - 27c)**

- 1 Oral (by mouth swallowing)
- 2 Smoking (inhale by burning / heating substance)
- 3 Inhalation (inhale or snort through the nose or mouth without burning the substance)
- 4 Injection (IV or intramuscular or skin popping)
- 5 Other

USE FREQUENCY (Field 28a - 28c)

- 1 No use in the past month
- 2 1-3 days in the past month (less often than once a week)
- 3 1-2 days per week
- 4 3-6 days per week
- 5 Daily

STANDARD PROGRAM CATEGORY /**SUBPROGRAM (Field 30)****Note:** Any other appropriate SPCs from CORE associated with alcohol and other drug abuse services should be reported even though not listed here.

SPC/SUB CODE	STANDARD PROGRAM CATEGORY NAME	UNITS TO BE REPORTED
Detox		
703 10	Medically managed inpatient detox	(75.06) Days
20	Medically monitored residential detox	(75.07) Days
50	Ambulatory detoxification	(75.08) Hours
705 10	Residential intoxicification monitoring	(75.09) Days
Residential		
503 50	Medically managed inpatient	(75.10) Days
60	Medically monitored hospital treatment	(124, 75.11) Days
70	Medically monitored CBRF treatment	(83, 75.11) Days
504	Residential care center	Days
506 10	Transitional residential-hospital setting	(124, 75.14) Days
20	Transitional residential	(83, 75.14) Days
203	Foster home	Days
204	Group home	Days
Ambulatory		
507 00	Outpatient, regular	(75.13) Hours
05	Outpatient, intensive	(75.13) Hours
65	Medication management	Hours
70	Methadone or narcotic detox	Hours
75	Methadone maintenance or narcotic treatment	(75.15) Hours
603	Intake assessment	Hours
509	Community support	Hours
510	Comprehensive community services	Days
704 10	Day treatment	(75.12) Hours
112 55	Specialized medical supplies	Items
Note: The following optional subprograms may be used in place of 00 and 05 if the agency wants the additional detail.		
507 10	Outpatient, individual regular	(75.13) Hours
15	Outpatient, individual intensive	(75.13) Hours
20	Outpatient, family regular	(75.13) Hours

25	Outpatient, family intensive	(75.13)	Hours
30	Outpatient, group regular	(75.13)	Hours
35	Outpatient, group intensive	(75.13)	Hours
40	Outpatient, in-home regular	(75.13)	Hours
45	Outpatient, in-home intensive	(75.13)	Hours
50	Emergency outpatient	(75.05)	Hours

SPC END REASON (Field 34)

Not required for SPCs 703, 705, 603 and brief services.

- 01 Completed service - major improvement
- 02 Completed service - moderate improvement
- 03 Completed service - no positive change
- 04 Referred - to another nonalcohol / drug agency, program or service
- 05 Behavioral termination - staff / program decision to terminate due to rule violation
- 06 Withdrew - against staff advice
- 07 Funding / authorization expired
- 08 Incarcerated
- 09 Death
- 14 Referral to another AODA agency or program
- 15 Transfer to another AODA service within an agency or program

CLOSING STATUS (Field 35)

Not required for SPCs 703, 705, 603 and brief services.

A = AODA = Frequency of alcohol / drug use during two weeks prior to discharge.

- 1 No use (abstinent)
- 2 1-3 days / month (less often than once a week)
- 3 1-2 days / week
- 4 3-6 days / week
- 5 Daily

F = FAMILY = Marital / family / interpersonal relationships or social support system

- 1 Very frequent positive contact
- 2 Frequent, usually positive contact
- 3 Occasional, sometimes positive, sometimes negative contact
- 4 Contact is usually negative
- 5 Little or no contact

E = EMPLOYMENT STATUS AT DISCHARGE

- 1 Employed full-time
- 2 Employed part-time
- 3 Unemployed, looking for work
- 4 Unemployed, not looking for work
- 5 Not in the labor force – homemaker
- 6 Not in the labor force – student
- 7 Not in the labor force – retired
- 8 Not in the labor force – disabled
- 9 Not in the labor force – inmate of jail, prison, or other institution

AR = ARRESTS = Number of arrests 30 days prior to discharge, or since admission if less than 30 days

LA = LIVING ARRANGEMENT AT DISCHARGE

- 01 Street, shelter, no fixed address, homeless
- 02 Private residence or household; living alone or with others without supervision; includes persons age 18 and older living with parents
- 03 Supported or semi-supervised residence
- 04 Specialized facility with on-site supervision
- 05 Other institution
- 06 Jail or correctional facility
- 07 Child under age 18 living with parents

TARGET GROUP (Field 36) (Optional)

- 04 Alcohol abuse
- 05 Drug abuse
- 17 Intoxicated driver
- 18 Alcohol and other drug abuse
- 74 Family member / other of AODA client